

#### PERMITTEE NAME/ADDRESS (MANN FRAME NAME A DATE OF A DATE

## NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPOES) DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

NOTE: Read instructions before completing this form.

NAME	Union Oil Company of California
ADDRESS	Attn: John Zager
	P.O. Box 196247
Water and a second	Anchorage, AK 99519-6247
FACILITY	Trading Bay Production Facility
LOCATION	Cook Inlet, Alaska

(2-15)			(17-19)				
AKG-31-5002					015	***********************	
PE	PERMIT NUMBER			DISCHARGE NUMBER			
		MON	ITORING PE	COOR		***************************************	
YEAR	MO	DAY		YEAR	MO	DAY	
09	10	01	TO	09	10	31	
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31	

**COMMENTS PAGE 3 OF 3** 

\* Flow rates include deck drainage from Dolly Varden, Grayling, King Salmon, Monopod, and Steelhead Platforms.

Estimated completion fluid flow rate:

0.050925 mgd 0.019530 mgd

Estimated workover fluid flow rate:

\*\* Frequency of pH measurement has been increased to more closely monitor water quality.

\*\*\* Per Permit instructions weekly samples consist of an average of 4 grab samples over a 24 hour period.

\*\*\*\* Identified as the most sensitive species.

DEC
Division of Water Quality
Wastewater Discharge Program

MAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified		TELL	PHONE	I	DATE	-
John Zager General Manaper Mid Continent/Alaska Business Unit	personnel property gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for	Timothy Brandshburg	(907)	276-7600	09	11	20
	gathering the information, the information submitted is, to the best of my knowledge and belief,	SIGNATURE OF		Nagradiani (1900)		1	1
	true, accurate, and complete. I am aware that there are significant penalties for submitting	PRINCIPAL EXECUTIVE OFFICER	AFREA	NUMBER	YEAR	MO	DA
TYPEO OR PRINTED  OMMENTS AND EXPLANATION OF ANY VIOLATIONS	false information, including the possibility of fine and imprisonment for knowing violations.	OR AUTHORIZED AGENT	CODE				1

### PERMITTEE NAME/ADDRESS (Include Facility Named,ocation if Different)

Anchorage, AK 99519-6247

Trading Bay Production Facility

Attn: John Zager

P.O. Box 196247

Cook Inlet, Alaska

Union Oil Company of California

NAME

ADDRESS

FACILITY

LOCATION

# NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

| DISCHARGE MONITORING REPORT (DMR) (2-16) (17-19) | AKG-31-5002 | 015 | PERMIT NUMBER | DISCHARGE NUMBER

MONITORING PERIOD YEAR MO DAY MO DAY 09 10 01 09 10 31 (20-21) (22-23)(24-25) (26-27) (28-29) (30-31) OMB No. 2040-0004

REVISED 05/03/2010

NOTE: Read instructions before completing this form.

#### **COMMENTS PAGE 3 OF 3**

\* Flow rates include deck drainage from Dolly Varden, Grayling, King Salmon, Monopod, and Steelhead Platforms.

Estimated completion fluid flow rate:

0.050925 mgd

Estimated workover fluid flow rate:

0.019320 mgd

- \*\* Frequency of pH measurement has been increased to more closely monitor water quality.
- \*\*\* Per Permit instructions weekly samples consist of an average of 4 grab samples over a 24 hour period.
- \*\*\*\* Identified as the most sensitive species.

05/03/2010 Revision: Estimated workover fluid flow rate was misreported.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I south code and the first the state of the						1
John Zager General Manager Mid Continent/Alaska Business Unit	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified	2 01	TELEPHONE		DATE		
	personnel properly gather and evaluate the information submitted. Based on my inquiry of	DN	(907) 276-7600		10	0.5	03
	the person or persons who manage the system, or those persons directly responsible for	Timothy Srandenburg					
	gathering the information, the information submitted is, to the best of my knowledge and belief,	SIGNATURE OF	1			O-T-New York (Albert Manager	***************************************
	true, accurate, and complete. I am aware that there are significant penalties for submitting	PRINCIPAL EXECUTIVE OFFICER	AREA	NUMBER	YEAR	MO	l na
TYPED OR PRINTED	false information, including the possibility of fine and imprisonment for knowing violations,	OR AUTHORIZED AGENT	CODE			******	1
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)							